CLAIMS AS FILED - PART I (Column 2) FOR NUMBER FILED NUMBER EXTRA BASIC FEE 380.00 OR X\$18= 760.00 TOTAL CLAIMS minus 20=											A	pplication	or D	ockeť Nun	nber
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SASIC FEE								1		_	LLU Cer	OR T			
TOTAL CLAIMS	B/	ASIC FEE	<u> </u>							HAI				RATE	
INDEPENDENT CLAIMS minus 3 = " X39=	TC	OTAL CLAIMS		/ / minus 20=			•					300.00	OR		760.00
MULTIPLE DEPENDENT CLAMPRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1)	INI	DEPENDENT C	LAIMS	/						X\$ 9=		OR	X\$18=		
* If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS AS AMENDED - PART II **Column 1)** **Column 2)** **Column 3)** **Column 3)** **Column 1)** **Column 1)** **Column 2)** **Column 3)** **Column 1)** **Column 3)** **Column 3)** **Column 3)** **Column 1)** **Column 1)** **Column 3)** **Column 3)** **Column 1)** **Column 3)** **Column 1)** **Column 3)** **Column 1)** **Column 3)** **Column 3)** **Column 3)** **Column 3)** **Column 1)** **Column 3)** **Colu	_			CLAIMT		-				X39=			OR	X78=	
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Column 1 Column 2 Column 3 SMALL ENTITY OR ADDIT FEE COLUMN 1										TOTAL		OR	TOTAL		
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130=					50 1 A 10 4					RATE			, ·	RATE	TIONAL
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CLAMS REMAINING AFTER AMENDMENT Total Total Minus Minu						•			,	DDIT. FE	ΞL		OR ,	ADDIT. FEE	
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* If the entry in column 1 is less than the entry in column 2, write "o" in column 3. * If the entry in column 1 is less than the entry in column 2, write "o" in column 3. * If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20." * ADDIT. FEE			REM AP AMEN	UNING TER		PRI	IUMBER EVIOUSLY	PRESENT EXTRA	•	RATE		TIONAL		RATE	ADDI- TIONAL FEE
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